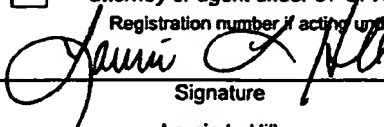




PTO/SB/22 (12-04) Approved for use through 7/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE <small>Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.</small>																									
<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b> <b>FY 2005</b> <small>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</small>																									
Docket Number (Optional) <b>511582006000</b>																									
Application Number <b>09/932,166</b>	Filed <b>August 17, 2001</b>																								
For <b>ISOLATION OF MEMBRANE BOUND LIGAND-SPECIFIC COMPLEXES</b>																									
Art Unit <b>1644</b>	Examiner <b>D. Saunders</b>																								
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):																									
<table><thead><tr><th></th><th><u>Fee</u></th><th><u>Small Entity Fee</u></th><th></th></tr></thead><tbody><tr><td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td>\$120</td><td>\$60</td><td>\$</td></tr><tr><td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td>\$450</td><td>\$225</td><td>\$</td></tr><tr><td><input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td>\$1020</td><td>\$510</td><td>\$ 510.00</td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td>\$1590</td><td>\$795</td><td>\$</td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td>\$2160</td><td>\$1080</td><td>\$</td></tr></tbody></table>			<u>Fee</u>	<u>Small Entity Fee</u>		<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$	<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ 510.00	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$
	<u>Fee</u>	<u>Small Entity Fee</u>																							
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$																						
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<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$																						
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$																						
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.																									
<input type="checkbox"/> A check in the amount of the fee is enclosed.																									
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.																									
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.																									
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>03-1952</u> <del>I have enclosed a duplicate copy of this sheet.</del> Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.																									
I am the <input type="checkbox"/> applicant/inventor.																									
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).																									
<input type="checkbox"/> attorney or agent of record. Registration Number _____																									
<input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 <u>51,804</u>																									
 _____ Signature																									
_____ Date <b>March 18, 2005</b>																									
_____ Typed or printed name <b>Laurie L. Hill</b>																									
_____ Telephone Number <b>(858) 720-7955</b>																									
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.																									
<input checked="" type="checkbox"/> Total of <u>1</u> forms are submitted.																									

13/22/2005 SFELEKE1 00000063 031952 09932166

11 FC:2253 510.00 DA

sd-250311

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**RAM** Fee History  
Query  
Revenue Accounting and Management

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Name/Number: 09932166

Total Records Found: 11

Start Date: Any Date

End Date: Any Date

Accounting Date	Sequence Num.	Tran Type	Fee Code	Fee Amount	Mailroom Date	Payment Method
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07/01/2003	00000023	<u>1</u>	<u>1251</u>	-\$110.00	06/26/2003	OP
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04/06/2005	00000002	<u>1</u>	<u>2201</u>	\$100.00	03/18/2005	DA 031952

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